

## On demand caesarean section: What's women's attitude ?

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### Abstract

**Objectives:** To evaluate the knowledge and attitude of Nepalese women towards mode of delivery and caesarean on demand.

**Study design:** Hospital based cross sectional descriptive study where 200 pregnant women after 37 completed weeks of gestation were recruited randomly and interviewed, and their answers were analyzed.

**Results:** Of the 200 interviewed pregnant women, all of them knew about normal vaginal delivery and caesarean delivery, but only 30% knew about instrumentally assisted delivery and 9% had heard about painless labour. Vaginal delivery was the preferred mode in 93% and 7% preferred caesarean delivery. Only 35% of the interviewed women believed that women should have the right to demand a caesarean section

**Conclusion:** Knowledge assessment of two hundred women regarding the mode of delivery clearly indicates the need for strengthening counseling aspect of antenatal care and awareness program regarding mode of delivery. In Nepal on demand caesarean section is not provided in the University Teaching Hospital. However one third of women still felt that women should have the right to choose caesarean section on demand.

**Key words.** Attitude, mode of delivery, Caesarean on demand.

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### Introduction

The caesarean section rate (CSR) has been increasing each year not only in developed countries but also in the developing countries. The CSR in different hospitals in Nepal varies between 10-30 %. This rate is probably higher in private institutes. Although caesarean section is becoming increasingly safe, normal vaginal delivery is still considered safer. Despite this fact the CSR is rising and evidence is emerging that non-obstetric factors may contribute to the high CSR, for example, by the woman's demand or request for the procedure.<sup>1-3</sup>

The CSR in USA increased six fold from 5.5 % in 1970 to 29 % in 2004.<sup>4,5</sup> The situation is not very different in less developed country like Nepal. Private hospitals have higher CSR than general hospitals. This is probably due to maternal choice regarding mode of delivery and partly due to obstetrician's convenience or for not liking to take risks.

Epidemiological studies in Brazil and Chile have demonstrated the higher CSR among women who have a higher level of education.<sup>6</sup>

Maternal knowledge and occupation has also been seen to influence the attitude of women towards mode of delivery. A recent survey among London female obstetrician with an uncomplicated singleton pregnancy showed that 31 % of them would choose an elective caesarean delivery for themselves.<sup>7</sup>

In this study an attempt was made to evaluate the knowledge and attitude of Nepalese women towards mode of delivery and caesarean section on demand.

### Methods

This study was conducted from December 2005 to May 2006 in the department of Obstetric & Gynecology, Kathmandu Medical College Teaching Hospital (KMCTH), Kathmandu. This was a hospital based

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cross sectional descriptive study. Two hundred pregnant women after 37 completed weeks of gestation who attended KMCTH antenatal clinic were interviewed. Interview was conducted three times per week on Sunday, Tuesday and Thursday. On these three days first three cases who had completed 37 weeks of gestation and willing to participate in the study were interviewed after obtaining verbal consent. Structured questionnaire was filled by interviewing the subjects.

Information collected includes age, address, education, occupation and obstetric history. The questionnaire inquired about the women's knowledge of mode of delivery, their preference of mode of delivery with its reason and attitude towards caesarean section on demand.

The data from the questionnaire were entered into electronic format and statistical analysis was done using Epi-Info 6.

**Results**

Six percent of the women in the sample studied were of age 19 or less, 84 % were between 20-29 years and 10 % were 30 and over. These women were of varying educational background, in college (59 %), school 38 % and 3 % had never been to school. 70 % of the women were housewives and 30 % were working women. Primigravidas were 61% and multigravidas were 39 % (78); 10 were delivered by caesarean section (CS).

Of the 200 interviewed women all of them knew about normal vaginal delivery and caesarean delivery but only 30% knew about instrumentally assisted vaginal delivery and 9% had heard painless labour. *Table 1*

Vaginal delivery was the preferred mode in 93% and 7% preferred caesarean section as their preferred mode of delivery.

The common reasons for choosing vaginal delivery were wish for natural process (44%), good for mother's health (60%), safer (86 %) and easy (30%). *Table 2*

Most of the women (88.5%) thought that caesarean delivery can cause long term ill effect on mother's health. *Table 3*

Avoidance of labour pain was the main reason behind choosing elective caesarean delivery in all 7 % women. When asked if they would prefer painless labour and vaginal delivery over caesarean delivery to which they replied was they would prefer vaginal delivery only if painless labour facilities were available.

Women (186) preferring vaginal delivery were asked about their preference of painless labour over normal labour and 74 said they would prefer painless labour if offered, while rest 112 did not want painless labour because of fear of side effects during the provision of painless labour from medication. All the women who preferred elective caesarean delivery initially said that they would rather opt for painless labour and vaginal delivery if offered over caesarean section.

Table 1. Knowledge of mode of delivery.

Type	Number	%
Vaginal delivery	200	100
Caesarean delivery	200	100
Instrumental delivery	60	30
Painless labor	18	9

Table 2. Perceived advantage and disadvantage of vaginal delivery.

Advantage	Number	%
Natural	88	44
Easy	60	30
Safer	172	86
Good for mother's health	120	60
Less cost	12	6
Disadvantage		
Painful	84	42
Tear/ Episiotomy	9	4.5

Table 3. Perceived advantage and disadvantage of caesarean delivery

Advantage	Number	%
Less pain	14	7
Safe for baby	8	4
Disadvantage		
Long term ill effect on mother's health	177	88.5
Costly	12	6

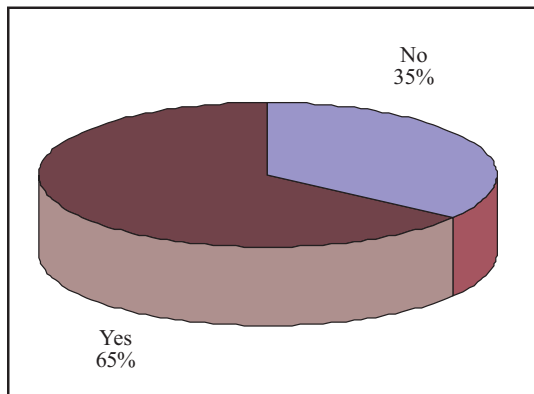


Figure 1. Right to choose caesarean section on demand

Only 35% believed that women should have the right to demand a caesarean section. *Fig 1*

## Discussion

Very few women knew about all the possible modes of delivery. This reflects the level of antenatal care in our country.

Rising CSR worldwide has been attributed to women's positive attitude towards caesarean section. But in this study only 7% of the women preferred caesarean delivery over vaginal delivery, probably because of low socioeconomic status of Nepalese and positive attitude of Asian women towards vaginal birth. In a similar study done in Singapore only 3.7 % of the women preferred caesarean delivery<sup>8</sup>, and 6.4 % of Australian women said they prefer caesarean delivery as a mode of delivery<sup>9</sup>. Preferences of caesarean delivery as a preferred mode were higher in western countries. In a Chilean study 9.4%, Swedish study 8.2%, and 16.9% of Italian women preferred an elective caesarean section.<sup>10-12</sup>

Women who preferred caesarean delivery in this study group were all primigravida and wanted to avoid labour pain and would prefer painless labour and vaginal birth over caesarean delivery if the facilities were available. This means making the painless labour facilities available in our labour wards and proper counseling and preparing them for normal vaginal birth, discussing risks and benefits of various birth options can help to decrease CSR.

Thirty five percent of the women in this study thought that the woman should have the right to a caesarean section on demand. Rest (65%) thought doctor's decision should be respected and they know best. These findings are similar in the Turkish study where 37.8% of health care provider and 36.2% public group believed that woman should have the right to choose caesarean section on demand.<sup>13</sup>

Contrary to this 71% of women in Singapore believed that women should have the right to demand a caesarean section.<sup>8</sup> this difference probably is due to difference in education level and socioeconomic status between developed and developing country.

## Conclusion

In Nepal on demand caesarean section is not provided in the University Teaching Hospital. However one third of women still felt that women should have the right to choose caesarean section on demand.

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